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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))</small>	Attorney Docket No.	678-452 (P9148)
	First Inventor or Application Identifier	Jae-Yoel Kim
	Title	Apparatus and Method for Spreading....
	Express Mail Label No.	EL393560547US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small> 2. <input checked="" type="checkbox"/> Specification [Total Pages 48] <small>(preferred arrangement set forth below)</small> - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 20] 4. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <small>(for continuation/divisional with Box 16 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).</small>	5. <input type="checkbox"/> Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 8. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) 9. <input type="checkbox"/> English Translation Document (if applicable) 10. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 11. <input type="checkbox"/> Preliminary Amendment 12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 13. <input type="checkbox"/> * Small Entity Statement filed in prior application, Status still proper and desired (PTO/SB/09-12) 14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 15. <input type="checkbox"/> Other:

*** NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).**

16. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment:
☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: _____
 Prior application information: Examiner _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS <input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or <input checked="" type="checkbox"/> Correspondence address below					
Name	Paul J. Farrell				
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City	Uniondale	State	NY	Zip Code	11553
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Name (Print/Type)	Peter G. Dilworth	Registration No. (Attorney/Agent)	26,450
Signature	<i>Peter G. Dilworth</i>	Date	2/4/00

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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 1999</h2> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision. Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td></td></tr> <tr><td>Filing Date</td><td></td></tr> <tr><td>First Named Inventor</td><td>Jae-Yoel Kim</td></tr> <tr><td>Examiner Name</td><td></td></tr> <tr><td>Group / Art Unit</td><td></td></tr> <tr><td>Attorney Docket No.</td><td>678-452 (P9148)</td></tr> </table>		Application Number		Filing Date		First Named Inventor	Jae-Yoel Kim	Examiner Name		Group / Art Unit		Attorney Docket No.	678-452 (P9148)
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TOTAL AMOUNT OF PAYMENT	(\$)	730.00													

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																																																																																																
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: 04-1121</p> <p>Deposit Account Name: Dilworth & Barrese</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>	<p>3. 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SUBMITTED BY			Complete (if applicable)	
Typed or Printed Name	Peter G. Dilworth		Reg. Number	26,450
Signature	Date	2/4/00	Deposit Account User ID	04-1121

PATENT

Atty. Docket No. 678-452 (P9148)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Assistant Commissioner
for Patents
Washington, D.C. 20231

UTILITY APPLICATION FEE TRANSMITTAL

Sir:

Transmitted herewith for filing is the patent application of

Inventor(s): Jae-Yoel Kim; Seung-Joo Maeng; Jae-Min Ahn; and Hee-Won Kang

For: APPARATUS AND METHOD FOR SPREADING CHANNEL DATA IN
CDMA COMMUNICATION SYSTEM USING ORTHOGONAL TRANSMIT
DIVERSITY

Enclosed are:

[X] 43 page(s) of specification

[X] 1 page(s) of Abstract

[X] 4 page(s) of claims

[X] 20 sheets of drawings [X] formal ☐ informal

[X] 2 page(s) of Declaration and Power of Attorney

[X] An Assignment of the invention to Samsung Electronics Co., Ltd.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date February 4, 2000 in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EL393560547US addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231.

Kevin C. Ecker

(Type or print name of person mailing paper)

(Signature of person mailing paper)

- ☐ This application claims the benefit under 35 U.S.C. §119(e) of U.S. Provisional Application(s) No(s).:

APPLICATION NO(S).:

FILING DATE

____/____/____

____/____/____

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____/____/____

☒ Certified copy of applications

Country

Appln. No.

Filed

Korea

4899/1999

2/4/99

from which priority under Title 35 United States Code, § 119 is claimed
☐ is enclosed.

☒ will follow.

CALCULATION OF UTILITY APPLICATION FEE

For	Number Filed	Number Extra	Rate	Basic Fee \$690.00
TOTAL CLAIMS	11	0	x 18 =	\$0
INDEPENDENT CLAIMS	3	0	x 78 =	\$0
<input type="checkbox"/> Multiple Dep. Claim	0		260	\$0
			TOTAL \$690.00	

- ☐ Verified Statement of "Small Entity" Status Under 37 C.F.R. § 1.27. Reduced fees under 37 C.F.R. § 1.9(f) (50% of total) paid herewith \$.

*Includes all independent and single dependent claims and all claims referred to in multiple claims. See 37 C.F.R. § 1.75(c).

☒ The amount of \$40.00 for recording the attached Assignment is enclosed as a separate check.

☒ Two checks in the amount of \$690.00 and \$40.00 to cover the ☒ recording, ☒ filing fee(s) are attached.

☐ Charge fee to Deposit Account No. 04-1121. Order No. _____
TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and 1.17, at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 04-1121. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 04-1121 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Date: February 4, 2000



Peter G. Dilworth
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